

# **POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM**

<b>Application Number</b>	TBD
<b>Filing Date</b>	Herewith
<b>First Named Inventor</b>	Richard Kent
<b>Title</b>	"SELF-HEATED THERMISTOR CONTROL"
<b>Art Unit</b>	TBD
<b>Examiner Name</b>	TBD
<b>Attorney Docket Number</b>	W-377-02

I hereby revoke all previous powers of attorney given in the above-identified application.

I hereby appoint:

☒ Practitioners associated with the Customer Number:

43840

OR

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Name	Registration Number

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☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

## **SIGNATURE OF Applicant or Assignee of Record**

<b>Signature</b>	<i>Richard M. Kent</i>	<b>Date</b>	8/9/06
<b>Name</b>	Richard Kent	<b>Telephone</b>	508-482-3535
<b>Title and Company</b>	Inventor		

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ \*Total of \_\_\_\_\_ forms are submitted.

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